



DEFENSE
HEALTH AGENCY

**OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS
ARMED FORCES MEDICAL EXAMINER SYSTEM
OFFICE OF THE ARMED FORCES MEDICAL EXAMINER
115 PURPLE HEART DRIVE
DOVER AFB, DE 19902-5051**

AUTOPSY REPORT

Autopsy Number: ME15-0318
Name: Gonzalez, Nohemi
Grade: Civilian
Date of Birth: 19 OCT 1992
Date of Death: 13 NOV 2015
Place of Death: Paris, France
Date/Time of Autopsy: 26 NOV 2015 @ 0800
Place of Autopsy: OAFME, Dover AFB, DE
Date Report Signed: 30 DEC 2015

Circumstances of Death: By report, this female was shot during the terrorist attacks in Paris, France on 13 NOV 2015. An autopsy was performed by the local medicolegal authority.

Authorization for Autopsy: Armed Forces Medical Examiner, IAW 10 USC 1471.

Identification: Positive identification by ante-mortem and post-mortem fingerprint and dental comparisons.

CAUSE OF DEATH: Gunshot Wound of the Chest

MANNER OF DEATH: Homicide

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EXTERNAL EXAMINATION

The body is received in an aluminum container within a wooden casket. The casket is covered with a cloth protector. Beneath this protector and on the casket is a clear plastic folder containing accompanying paperwork and keys for the casket, three flowers and a blue and red banner with French writing. Attached to the casket is a yellow colored plaque with the decedent's name inscribed on it. The body is wrapped in a white sheet with a white shroud around the neck covering the anterior aspect of the torso. Attached to the right ankle is a paper tag inscribed with "Gonzalez Nohemi; 1m56; 44 kg; 2410". A white tag labeled ME15-0318 is attached to the left ankle at intake.

The body is that of a well-developed, well-nourished female that appears compatible with the reported age. The body has been previously autopsied but not embalmed. Injuries are described in the section "Evidence of Injury". The body is approximately 51 ½ inches in length and weighs 103 pounds. Lividity is fixed on the posterior surface of the body except in the areas exposed to pressure. Rigor is resolved in all four extremities.

The scalp hair is black with streaks of blue. There is a sutured incision that extends from posterior to one ear, across the vertex of the head, to posterior to the other ear. There are caps over the eyes. The irides appear brown. The corneae are cloudy. The conjunctivae are pale. The sclerae are white. There are no palpable fractures of the facial bones. The external nares, external auditory canals and mouth are free of abnormal secretions. The lips are dried and appear to be coated with lipstick. The teeth are natural. The ears are pierced but no earrings are attached. There is a 22-inch, midline, sutured incision that extends from the neck to the pubic symphysis. There is 5-inch, horizontal, sutured incision inferior to the left clavicle. The umbilicus ("belly-button") appears to be pierced but no jewelry is attached. There is a 21-inch, midline sutured incision that extends from the posterior aspect of the neck to superior to the natal cleft. The extremities are symmetric. A tattoo is on the left arm (photographed for documentation). The fingernails are painted red. On the anterior aspect of the left thigh is an 8-inch, vertical, sutured incision. Medial to this incision are multiple puncture marks. On the medial aspect of the left leg is a 2 ½ x 2-inch area of hyperpigmented skin. On the left buttock, extending to the posterior aspect of the left thigh is a 10-inch, sutured incision. Lateral to this is a 3-inch, horizontal, sutured incision. The toenails have polka dots on them. There are multiple scars of the extremities.

CLOTHING AND PERSONAL EFFECTS

The body is unclad. No personal effects accompany the body.

MEDICAL INTERVENTION

There is no evidence acute medical intervention.

RADIOGRAPHS

A complete set of post-mortem radiographs is obtained and the injuries identified are incorporated into the section "Evidence of Injury". All of the internal organs, including the brain, are in the thorax. A section of the proximal left femur has been removed.

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EVIDENCE OF INJURY¹

Ballistic wound of the chest:

On the left side of the chest, centered 9 ½ inches below the top of the head and 4 inches left of the anterior midline is a 4 x 3-inch area of incised skin that has been sutured. There is a ¼-inch wide abrasion along the medial and superior margin. There is no evidence of gunpowder stippling or soot deposition on the surrounding skin. On the right side of the upper back, adjoining the midline sutured incision of the back and centered 13 ½-inches below the top of the head and 1-inch right of the posterior midline is a 4 x 2-inch area of incised skin. There is no evidence of gunpowder stippling or soot deposition on the surrounding skin. There is injury to the soft tissue, anterior aspects of the 2nd and 3rd left ribs (1 ½ x ½-inch defect with fractures), upper and lower lobes of the left lung (lacerated), posterior aspect of the left 6th rib (¾ x ½-inch defect with fracture), left transverse process of the 6th thoracic vertebra (fractured), and the spinous processes of the 5th – 7th thoracic vertebrae (fractured). Three minute plastic fragments are recovered from the muscle of the left chest and one minute plastic fragment is recovered from the left chest wall. Associated injuries include hemorrhage along the wound path, subarachnoid hemorrhage of the spinal cord, and contusion of the thoracic spinal cord at the level of the 7th thoracic vertebra.

Ballistic wound of the left lower extremity:

On the posterior-lateral aspect of the left lower extremity, centered 26 inches above the left heel and 5 inches left of the posterior midline of the left lower extremity is a 2 ½ x 2-inch area of incised skin that has been sutured. Removal of these sutures and the adjacent vertical sutures reveals a hemorrhagic wound path. This wound track is directed front to back, left to right, and downward. No ballistic fragments are retained in the wound path.

Additional injuries:

On the left side of the forehead is a ¼ x ¼-inch abrasion. There is a 1 ¼-inch linear abrasion on the right elbow and a 2 x 2-inch contusion on the posterior aspect of the right hand.

INTERNAL EXAMINATION

Removal of the sutures on the anterior aspect of the left thigh reveals incisions of the muscles and removal of a segment of the proximal left femur (presumably for DNA). Removal of vertical sutures of the back reveals the injuries described in "Evidence of Injury".

BODY CAVITIES:

The body has been previously autopsied. The chest plate is in its proper location but has been previously removed. All of the internal organs, including the brain, have been previously dissected and are in the thorax.

¹ Previous autopsy limits a complete assessment of the injuries sustained.

HEAD (CENTRAL NERVOUS SYSTEM) and NECK:

The scalp has been previously incised and the calvarium has been previously opened. There are paper towels within the cranial vault. No skull fractures are identified. The brain is in the thorax, has been previously dissected, and weighs 1000 grams. The gyri and sulci are unremarkable. Sections through the cerebral hemispheres, cerebellum and brainstem reveal no lesions. The atlanto-occipital joint is stable.

The anterior strap muscles of neck, thyroid cartilage and hyoid bone are in the thorax and have been previously dissected. The larynx is lined by intact white mucosa.

RESPIRATORY SYSTEM:

See "Evidence of Injury". The lungs have been previously dissected and are in the thorax. The right and left lungs weigh 220 and 200 grams, respectively. Where uninjured, the pulmonary parenchyma is pink to red-purple.

CARDIOVASCULAR SYSTEM:

The heart weighs 140 grams and has been previously dissected. The coronary arteries have been previously sectioned and appear widely patent. The myocardium is firm and homogenous. The walls of the left ventricle, interventricular septum, and right ventricle are 1.0, 1.0, and up to 0.1 centimeters thick, respectively. The section of aorta identified is unremarkable.

HEPATOBIILIARY SYSTEM:

The liver weighs 740 grams and has been previously dissected. The parenchyma is tan-brown with the usual lobular architecture. No mass lesions are identified. The gallbladder is incised and contains no bile.

GENITOURINARY SYSTEM:

The kidneys have been previously dissected and weigh 120 grams in total. The external surfaces are intact, smooth and red-tan. The cut surfaces are red-tan and the cortices are delineated from the medullary pyramids. The pelves are unremarkable and the ureters are normal in course and caliber. The bladder has been previously incised and contains no urine. The uterus, cervix, fallopian tubes, and ovaries are unremarkable.

GASTROINTESTINAL SYSTEM:

The gastrointestinal system has been previously dissected. No gross abnormalities are identified

LYMPHORETICULAR SYSTEM:

The spleen weighs 60 grams and has been previously dissected. The parenchyma is maroon with unremarkable lymphoid follicles.

ENDOCRINE SYSTEM:

The pituitary gland has been removed. The thyroid gland is unremarkable. The adrenal glands are not identified.

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MUSCULOSKELETAL SYSTEM:

See "Evidence of Injury". No non-traumatic bone or joint abnormalities are identified.

TOXICOLOGY (Accession# 155151)

- Volatiles: Acetaldehyde (trace) detected in the liver; Acetaldehyde (trace) and ethanol (45 mg/dL) detected in the kidney.
- Drugs: No screened drugs of abuse/medications detected in the liver

ADDITIONAL REMARKS

1. Assisting with the autopsy and taking documentary photographs are OAFME personnel. A representative from the FBI attended the autopsy. A complete list of all individuals in attendance is on file.
2. Selected portions of organs and fluids are retained for toxicology and/or DNA identification.
3. Flowers and ribbon are forwarded with the body to the funeral home.
4. Recovered evidence: Plastic fragments describe in "Evidence of Injury" are photographed, placed in a labeled evidence container, and released to FBI representative in attendance.


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FINAL AUTOPSY DIAGNOSES

- I. Ballistic wound of the chest:**
 - A. Injury to: Soft tissue, ribs, left lung, and thoracic spinal column
 - B. Recovered evidence: Multiple plastic fragments
 - C. Associated injury: Hemorrhage along the wound path, subarachnoid hemorrhage of the spinal cord, and contusion of the spinal cord
- II. Ballistic wound of the left lower extremity**
- III. Additional injuries:**
 - A. Abrasions of the forehead and right elbow
 - B. Contusion of the right hand

OPINION

This Civilian, Nohemi Gonzalez died of a gunshot wound of the chest. Although the skin wounds of the wound path have been previously excised and not available for review and given the reported history of the decedent being shot, the injuries of the chest are consistent with a gunshot wound, a subcategory of a ballistic wound. The minute plastic fragments on the left side of chest along the wound path are consistent with the projectile striking an object before entering the chest. Although the removal of the skin wounds limits the assessment of the trajectory of the projectile through the body, the fracturing of the bone and bone fragments observed on radiographs are consistent with a front to back, left to right, and downward trajectory of the projectile. It appears that the projectile that caused the ballistic wound of the left lower extremity has been previously removed. The toxicology screen is consistent with either post-mortem production (decomposition) or consumption of alcoholic beverages prior to death. If additional information becomes available that necessitates a change, an amendment to this report will be made. The manner of death is homicide.


Edward L. Mazuchowski, MD, PhD
LtCol, USAF, MC
Deputy Armed Forces Medical Examiner

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DEPARTMENT OF DEFENSE
ARMED FORCES MEDICAL EXAMINER SYSTEM
115 PURPLE HEART DRIVE
DOVER AFB, DE 19902-5051

REPLY TO
ATTENTION OF

MCMR-MET

15 December 2015

TO:

ARMED FORCES MEDICAL EXAMINER SYSTEM
115 PURPLE HEART DRIVE
DOVER AFB, DE 19902

Name: GONZALEZ, NOHEMI

SSN: 613-60-8384

Toxicology Accession#: 155151

Autopsy#: ME15-0318

Condition of Specimens: GOOD

Incident Date: 11/13/2015

REPORT OF TOXICOLOGICAL EXAMINATION
EMBALMED

VOLATILES: The **LIVER** and **KIDNEY** were examined for the presence of ethanol, acetaldehyde, acetone, 2-propanol, 1-propanol, t-butanol, 2-butanol, iso-butanol and 1-butanol by headspace gas chromatography flame ionization detection with an ethanol reportable limit of 20 mg/dL.

The following volatiles were detected (concentration(s) in mg/dL):

| | Acetaldehyde | Ethanol |
|--------|--------------|---------|
| LIVER | Trace | NF |
| KIDNEY | Trace | 45 |

NF = "None Found"

Trace = value greater than or equal to 1 mg/dL, but less than 5 mg/dL

Tissues reported in mg/kg

DRUGS: The **LIVER** was screened for amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, opioids, phencyclidine, sympathomimetic amines, and alkaline extractable drugs by immunoassay or gas chromatography/full scan-mass spectrometry. The following drugs were detected:

None were found.

GEORGE JACKSON, PhD, F-ABFT
Certifying Scientist, Forensic Toxicology Laboratory
Armed Forces Medical Examiner System

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FREEDOM OF INFORMATION ACT Exemption No. 6c,d Applies*

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CERTIFICATE OF DEATH (OVERSEAS)

Acte de décès (D'Outre-Mer)

| | | | | |
|--|--|--|---|---|
| NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) Gonzalez, Nohemi, | | GRADE Grade | BRANCH OF SERVICE Arme Civilian | SOCIAL SECURITY NUMBER Numéro de l'Assurance Sociale 613-60-8384 |
| ORGANIZATION Organisation | | NATION (e.g. United States) Pays United States | DATE OF BIRTH Date de naissance 19 October 1992 | SEX Sexe <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE |
| RACE Race <input type="checkbox"/> CAUCASOID Caucasique <input type="checkbox"/> NEGROID Negroïde <input checked="" type="checkbox"/> OTHER (Specify) Autre (Spécifier) Hispanic | | MARITAL STATUS État Civil <input checked="" type="checkbox"/> SINGLE Célibataire <input type="checkbox"/> MARRIED Marié <input type="checkbox"/> WIDOWED Veuf <input type="checkbox"/> DIVORCED Divorcé <input type="checkbox"/> SEPARATED Séparé | | RELIGION Culte <input type="checkbox"/> PROTESTANT Protestant <input type="checkbox"/> CATHOLIC Catholique <input type="checkbox"/> JEWISH Juif <input checked="" type="checkbox"/> OTHER (Specify) Christian |
| NAME OF NEXT OF KIN Nom du plus proche parent Beatriz Gonzalez | | RELATIONSHIP TO DECEASED Parenté du décédé avec le susdit Mother | | |
| STREET ADDRESS Domicile à (Rue) 12700 Elliott Avenue, Apartment 484 | | CITY OR TOWN OR STATE (Include ZIP Code) Ville (Code postal compris) El Monte, CA 91732 | | |
| MEDICAL STATEMENT Déclaration médicale | | | | |
| CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne) | | | | INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès |
| DISEASE OR CONDITION DIRECTLY LEADING TO DEATH ¹ Maladie ou condition directement responsable de la mort. ¹ | | Gunshot wound of the chest | | |
| ANTECEDENT CAUSES Symptômes précurseurs de la mort | MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire | | | |
| | UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire | | | |
| OTHER SIGNIFICANT CONDITIONS ² Autres conditions significatives ² | | | | |
| MODE OF DEATH Condition de décès | AUTOPSY PERFORMED Autopsie effectuée <input checked="" type="checkbox"/> YES Oui <input type="checkbox"/> NO Non | | CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures | |
| <input type="checkbox"/> NATURAL Mort naturelle | MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie | | | |
| <input type="checkbox"/> ACCIDENT Mort accidentelle | | | | |
| <input type="checkbox"/> SUICIDE Suicide | NAME OF PATHOLOGIST Nom du pathologiste Edward L. Mazuchowski, Lt Col, USAF, MC | | | |
| <input checked="" type="checkbox"/> HOMICIDE Homicide | SIGNATURE Signature <i>Edward L. Mazuchowski</i> | DATE Date 26 November 2015 | AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non | |
| DATE OF DEATH (day, month, year) Date de décès (le jour, le mois, l'année) 13 November 2015 | | PLACE OF DEATH Lieu de décès Paris France | | |
| I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du dé funst et je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus. | | | | |
| NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire Edward Mazuchowski | | TITLE OR DEGREE Titre ou diplôme Medical Examiner | | |
| GRADE Grade Lt Col | | INSTALLATION OR ADDRESS Installation ou adresse Dover AFB, Dover DE | | |
| DATE Date 12/10/2015 | | SIGNATURE Signature <i>Edward L. Mazuchowski</i> | | |

DD FORM 1 APR 77 2064

REPLACES DA FORM 3565, 1 JAN 72 AND DA FORM 3565-R(PAS), 26 SEP 75, WHICH ARE OBSOLETE.

(REMOVE, REVERSE AND RE-INSERT CARBONS BEFORE COMPLETING THIS SIDE)

| DISPOSITION OF REMAINS | | | |
|-------------------------------------|-----------------------------------|--------------------------|-------|
| NAME OF MORTICIAN PREPARING REMAINS | GRADE | LICENSE NUMBER AND STATE | OTHER |
| INSTALLATION OR ADDRESS | DATE | SIGNATURE | |
| NAME OF CEMETERY OR CREMATORY | LOCATION OF CEMETERY OR CREMATORY | | |
| TYPE OF DISPOSITION | | DATE OF DISPOSITION | |
| REGISTRATION OF VITAL STATISTICS | | | |
| REGISTRY (Town and Country) | DATE REGISTERED | FILE NUMBER | |
| | | STATE | OTHER |
| NAME OF FUNERAL DIRECTOR | ADDRESS | | |
| SIGNATURE OF AUTHORIZED INDIVIDUAL | | | |

DD FORM 2064, APR 1977 (BACK)

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